

**PETITION TO THE ATTORNEY GENERAL FOR  
REMISSION OR MITIGATION OF CIVIL FORFEITURE**

TO:           The Attorney General of the United States  
              c/o U.S. Attorney's Office for the Northern District of New York  
              218 James T. Foley Courthouse  
              445 Broadway  
              Albany, New York 12207

(A copy will be forwarded to the Internal Revenue Service)

FROM:       \_\_\_\_\_

              \_\_\_\_\_

              \_\_\_\_\_

              \_\_\_\_\_

I, \_\_\_\_\_, the undersigned petitioner, assert that I am a victim of an offense involving mail and wire fraud for which funds were seized. A civil complaint was filed by the U.S. Attorney's Office, Northern District of New York, seeking forfeiture of the seized funds which is entitled *United States v. \$2,300,577.10 in United States Currency, et al. Civil Case No. 05-CV-355*. The forfeiture complaint alleges that the defendant funds are proceeds of a wire fraud scheme which began in or around September 2003 when an individual by the name of Kenneth G. Titus, Sr. through use of the internet and other means operated an organization that claimed to provided "humanitarian aid" to individuals in the form of charters to be used to pay off individuals' mortgages, child support, credit card debt and even church mortgages.

Please provide the following information: (Please attach an additional sheet if you need more space.)

1. I suffered the following loss of property as a direct result of the mail and wire fraud offense described more fully in the forfeiture complaint and I had no knowledge that anyone was/were engaged in the alleged illegal activity.

(Describe: the property in detail, including serial numbers, legal descriptions, etc. as appropriate; any evidence of the fair market value of the property as of the date of the loss.)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2. The circumstances which led to my being a victim are as follows:

(Describe in detail how you were victimized, providing names of witnesses, dates and locations, explaining how you were induced to do so and what, if any, direct or indirect benefits you received. (Please attach an additional sheet if you need more space.)

---

---

---

---

3. I have made the following efforts to receive compensation for my losses:

(Describe in detail all attempts to be reimbursed and the outcome or present status of those efforts. I am unaware of any other assets of the defendant(s) against which I might have recourse, except funds described in the preceding paragraphs. (Please attach an additional sheet if you need more space.)

---

---

---

---

---

4. I affirm that I have not been compensated for my losses. I further affirm that if I receive any compensation for my losses, I will immediately notify the official who grants this petition (if it is granted) of that fact.

5. I did not knowingly contribute to, participate in, benefit from, or act in a willfully blind manner towards the commission of the offense, or related offense, that was the underlying basis of the forfeiture.

### **DECLARATION**

State of: \_\_\_\_\_

County of: \_\_\_\_\_

I hereby declare under penalty of perjury that the foregoing petition, including any attachments thereto, is true and correct in every respect.

Executed: \_\_\_\_\_  
[Enter date signed] [Signature of Petitioner]

**(NOTE: SIGNATURE OF PETITIONER MUST BE NOTARIZED)**

***ONLY FILL OUT THE FOLLOWING IF YOU ARE REPRESENTED BY AN ATTORNEY:***

**DECLARATION OF REPRESENTED PETITIONER**

State of: \_\_\_\_\_

County of: \_\_\_\_\_

I hereby declare under penalty of perjury that I have authorized the attorney listed below to represent me in this proceeding, that I have fully reviewed the petition, including any attachments thereto, and that the petition and any such attachments are true and correct in every respect.

Name of Attorney: \_\_\_\_\_

Address of Attorney: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Executed: \_\_\_\_\_  
[Enter date signed] [Signature of Petitioner]

**(NOTE: SIGNATURE OF PETITIONER MUST BE NOTARIZED)**

**DECLARATION OF ATTORNEY REPRESENTING PETITIONER**

State of: \_\_\_\_\_

County of: \_\_\_\_\_

hereby declare under penalty of perjury that upon information and belief the foregoing petition, including any attachments thereto, is true and correct in every respect.

Executed: \_\_\_\_\_  
[Enter date signed] [Signature of Attorney]